

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 MAY 31 PM 3:12

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Ernie Rivera For Florida

ADDRESS (number and street)

PO Box 9

☐

(Check if address
is changed)

Land O' Lakes

FL

34639

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address
is changed)

erniejamespr@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

2. DATE

05 ' 19 ' 2016

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Alan K. Geer, CPA

Signature of Treasurer

Alan K. Geer, CPA

Date

05 ' 20 ' 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Ernesto Rivera

Candidate Party Affiliation

REP

Office Sought:

☐

House

☒

Senate

☐

President

State

FL

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☒ This committee is a **NAT** (National, State or subordinate) committee of the **REP** (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|--|---------------|---|
| 1. | | FEC ID number | C |
| 2. | | FEC ID number | C |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | C |

201603210200191454

Write or Type Committee Name

Ernie Rivera For Florida

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

None

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Alan K. Geer

Mailing Address

7401 D Temple Terrace Hwy

Tampa

FL

33637

Title or Position

CITY

STATE

ZIP CODE

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Alan K. Geer

Mailing Address

7401 D Temple Terrace Hwy

Tampa

FL

33637

Title or Position

CITY

STATE

ZIP CODE

Telephone number

813 - 988 - 9564

TREASURER

201605310200191455

Full Name of
Designated
Agent

Atasha Ramdial

Mailing Address

7401 D Temple Terrace Hwy

Tampa

CITY

FL

STATE

33637

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

813 - 988 - 9564

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Suntrust

Mailing Address

7914 Land O' Lakes Blvd

Land O' Lakes

CITY

FL

STATE

34639

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE


ZIP CODE

201605310200191456


Alap K. Geer, P.A., CPAS
7401 D Temple Terrace Hwy
Tampa, FL 33637

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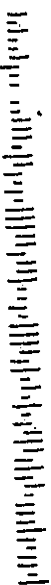
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FL 335
25 MAY 2016
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U. S. SENATE
TRACKING NUMBER

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Office of Public Records
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United States Senate

OFFICE OF THE SECRETARY

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Postmark

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FEDERAL EXPRESS _____

☐

UPS _____

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DHL _____

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AIRBORNE EXPRESS _____

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

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NO POSTMARK ☐

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OTHER _____

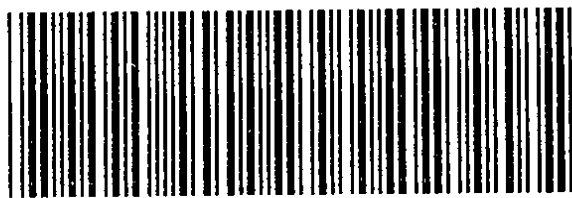
Date of Receipt or Postmark

PREPARER _____

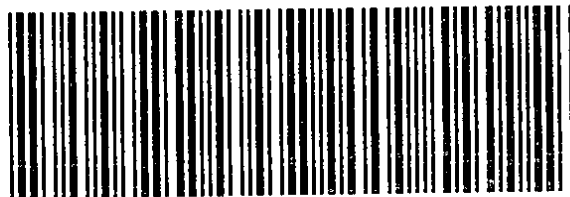
DATE PREPARED

4/04/16

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SEN PATCH



SEN PATCH

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